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PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 01050

First Named Inventor Price

**COMPLETE IF KNOWN**

Application Number 10/035,885

Filing Date 12/24/2001

Art Unit 3732

Examiner Name Kuhns

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Duplication of Lost Dentures

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 12/24/2001 as United States Application Number or PCT International

Application Number 10/035,885 and was amended on (MM/DD/YYYY) 05/01/2002 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

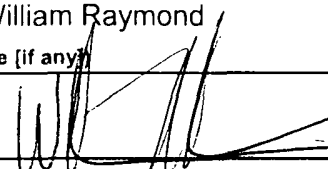

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name William Raymond (first and middle [if any])				Family Name Price or Surname			
Inventor's Signature 				Date May 1 2002			
Winston-Salem		NC		US		US	
Residence: City		State		Country		Citizenship	
1452 Ridgemere Lane							
Mailing Address							
Winston-Salem		NC		27106		US	
City		State		ZIP		Country	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Cannon Gary (first and middle [if any])				Family Name Sample or Surname			
Inventor's Signature 				Date 5-01-02			
Winston-Salem		NC		US		US	
Residence: City		State		Country		Citizenship	
229 Brittany Joy Drive							
Mailing Address							
Winston-Salem, NC		NC		27107		US	
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<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	10/035,885
Filing Date	12/24/2001
First Named Inventor	Price
Title	Duplication of Lost Dures
Group Art Unit	3732
Examiner Name	Kuhns
Attorney Docket Number	01050

I hereby appoint:

☒ Practitioners at Customer Number

24386

OR

☐ Practitioner(s) named below:

24386

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Cannon Gary Sample
Signature	
Date	MAY 1 02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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